

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M G		4/70/00
O.I.P.E. CLASSIFIER			4-1700
FORMALITY REVIEW	J.S.	69134	6-15-2000
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	✓ 6/2/00
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
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31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
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Claim	Date
Final	Original
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61	✓
62	✓
63	✓
64	✓
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66	✓
67	✓
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69	✓
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions  
staple additional sheet here